

The Health Services Handbook for Families & Friends of Inmates



**Vermont Department of Corrections
Health Services Division
2007**



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1. Introduction

Every inmate is a part of a family. We know incarceration is often a difficult time not only for the offenders, but also for their families and friends. Separation due to incarceration can often evoke a lot of feelings and a lot of questions.

This handbook has been designed specifically for the families and friends of persons incarcerated within the Vermont Department of Corrections. We hope by knowing about some of the procedures and having answers to some common questions you'll feel better able to support each other and your loved one.

We hope you will find it helpful and welcome your feedback and comments.

Sincerely,

Susan Wehry, M.D.

Health Services Director

Agency of Human Services

Department of Corrections

2. The First 24 Hours

A person enters jail or prison through the *booking process*. During the booking process:

- Inmates are fingerprinted, photographed and given an identification card.
- Personal property is inventoried and placed into storage for 30 days. A family member or friend may pick up any personal property that cannot be taken into the facility. Unclaimed property is removed after the 30 days.
- Money is put into the inmate's account, which is available for withdrawals and deposits.
- Inmates are questioned about their general health, substance use, thoughts of hurting themselves and other aspects of mental health.
- Inmates are then assigned to a living unit and a caseworker who will help the inmate work on a plan of release.

After booking, inmates go through a screening process known as *intake* which is conducted by the on-site health professional. Inmates are asked questions about all medical, dental and mental health conditions. All information is kept confidential and becomes a part of an inmate's medical record. A skin test known as a PPD is placed to screen for tuberculosis.

At the end of the intake process, inmates are allowed to make one phone call in the booking area. Inmates are not able to receive calls at the facility so the best way for family and friends to stay in touch is through mail and visits.

How Can You Help?

- Pick up personal property.
- Encourage your friend or family member to answer questions honestly.
- Before coming to prison, help your friend or family member make a list of all prescribed medications, the name and phone number of the doctor who prescribes them as well as the name and number of the pharmacy where they are purchased.
- Tell them NOT TO BRING in medications; they will be confiscated even if legitimately prescribed.
- Stay in touch and remain supportive of your friend or family member's efforts to take responsibility for their behavior and crime.
- Contact Victim's Services at (802) 241-2338 if you are also a victim of your loved one's crime.
- Because of new federal regulations related to Medicaid, proof of citizenship may be required if your family member ever needed to be in the hospital. Locating the inmate's birth certificate and storing it in a safe location would be very helpful.

3. Beyond Booking

Mail, Visits and Phone Calls

Visitors must be cleared through security and have a photo-id. Visitors under the age of 18 must be accompanied by a parent or legal guardian. All incoming mail will be opened by a staff member in front of the inmate to be inspected for illegal items. An inmate's address can also be found on the "offender locator" section on the Department of Corrections' website: www.doc.state.vt.us.

How Can You Help?

- Do not bring tobacco, drugs or contraband of any kind into the facility.
- Write and visit as often as you are able.

Medical and Mental Health Care

Health services are provided by private companies who specialize in correctional health care. In Vermont, Prison Health Services, Inc. provides our medical services and MHM, Inc. provides the mental health services. Qualified health care professionals are available 24 hours a day, 7 days a week.

Within 7 days, a physician, nurse practitioner or physician assistant completes a history and physical exam on any person who is incarcerated for more than 48 hours. The provider makes a plan of care with the inmate for any identified conditions. When necessary, specialty consultations are arranged outside the facility.

While incarcerated, inmates obtain medical, mental health, dental and eye care (optometry) by filling out a sick call slip. If an inmate needs assistance filling out the form, a member of the health care team or correctional staff can help them. A nurse sees all inmates who put in a sick call slip within 48 hours and takes care of minor problems or refers the inmate to see the provider. How soon the provider sees the inmate depends on how urgent the problem is. Routine problems are seen within 14 days.

In an emergency, inmates are seen immediately and treated or transferred to an emergency room.

Eye glasses are provided for those who need them.

The mental health staff offers support and treatment to individuals who have a psychiatric illness as well as help coping with being incarcerated. Inmates may be counseled individually, in a group, treated with psychiatric medications or some combination of these interventions. In most facilities, qualified mental health professionals are on site 5 days a week.

Inmates access the mental health staff as they do any health service: by putting in a sick call slip. Correctional officers or another qualified health professional may also make a referral.

Emergency mental health consultation by phone is available 24 hours a day, 7 days a week.

Confidentiality

Everything an inmate shares with a member of the health care team is confidential. The only exceptions to this are:

- threats of harm to self or others;
- plans for an escape; and/or,
- disclosures of abuse of a child, elderly person or someone who is disabled¹.

¹ By law, such information must be reported to the State Police for investigation.

If you have questions about your loved one's health there are several steps to take:

1. Ask your loved one to sign a release of information allowing his or her caseworker to talk with you.
2. Contact the assigned caseworker with specific questions which the caseworker will communicate to medical or mental health.
3. If this is unsuccessful, you may contact the Health Services Division of the Department of Corrections at (802) 241-2295.

Food Services

Special diets such as low fat, low cholesterol, low sodium, vegetarian or diabetic diets are available for inmates who have a doctor's order. Soft diets can also be ordered for inmates with chewing or swallowing problems. Food allergies must be reported to the medical staff.

How Can You Help?

- Encourage good health habits and cooperation with the health care team.
- Communicate directly with the caseworker for concerns and questions.

4. Suicide Prevention

Who is at risk of suicide?

Whether a first-time or repeat offender, inmates are particularly vulnerable to suicidal thoughts and actions. All inmates are carefully watched. Correctional officers know the risk factors: history of mental health issues, substance abuse disorders, social adjustment problems, a serious illness, a recent loss of a loved one, divorce, separation, or a personal or family history of suicide attempts and are trained to recognize and report warning signs of suicidal behavior.

Why do offenders commit suicide?

People can be overwhelmed by the impact of arrest and incarceration; the day-to-day stress of incarceration; the lack of privacy; the loss of control over life decisions; the denial of an appeal or parole decision; isolation from friends and family; a divorce or similar event can all lead to depression. These factors can sometimes lead an offender to attempt suicide. Offenders may also feel badly about the effect of their crime and think suicide is the best way out.

How does the Department of Corrections try to reduce the risk of suicide?

Training in suicide prevention is one of the core competencies for correctional officers. These trained correctional officers screen each newly arrived offender for mental health issues, thoughts of suicide and other signs of distress. We pay particular attention to those in high-risk categories.

What are some of the warning signs?

- Change in usual mood or personality such as nervousness, outbursts of anger, impulsive or reckless behavior, or apathy about appearance or health
- Change in attention span
- Recent loss such as a divorce or death
- Change in sleep habits
- Change in diet, weight loss or gain

- Previous suicide attempts
- Talking about death or dying
- Loss of interest in normal activities
- Giving away prized possessions, making a will or other final arrangements
- Telling you secrets or confessing
- Withdrawal from friends and family
- Saying goodbye to you and others
- Talking about how bad they are or have been
- Feeling hopeless; sadness
- Frequent irritability or unexplained crying

How Can You Help?

- If you see any warning signs or if an inmate tells you something about self harm or suicide, it is very important that this is reported immediately to the inmate's caseworker or supervisor on duty.

5. Prison Rape Elimination Act (PREA)

Prison rape is often underreported by male and female offenders due to the sensitive nature of the issue. Rape or any type of sexual assault should be reported by an offender as an Emergency Grievance. This includes the use of threats, intimidation, touch or anything used to pressure another to participate in sexual activities.

If you learn of a sexual assault please contact the Agency of Human Services Investigations Unit at 1-877-360-2597. This number is toll free and connects directly to the Investigations Unit. All calls are kept confidential.

6. Release of Information

Access to Health Care Records

If an inmate wishes to review their health care records, they can ask to review them with their health care provider. When an inmate is released, they may request a copy of these records be sent to their community provider.

7. Public Health Issues

When we talk about public health issues, we are talking about how certain diseases are common in some populations and how these diseases can affect not just the individual but a whole community. Among inmates for example, we know there are high rates of diabetes, liver diseases (such as Hepatitis A, B, and C), asthma, mental health problems and substance abuse. Inmates also have high rates of sexually transmitted diseases known as STDs.

When taking a public health approach, we focus on screening for diseases to help prevent them from spreading and to intervene early to lessen the impact of the disease. We routinely screen for tuberculosis (TB), substance abuse, mental health issues, liver

disease and diabetes. We offer inmates the opportunity to be screened for Human Immunodeficiency Virus (or HIV), Acquired Immune Deficiency Syndrome (or AIDS), Hepatitis C and Syphilis. We routinely offer comprehensive pre and post-natal care to incarcerated women who are pregnant.

In collaboration with the Department of Health, we educate staff and inmates about everything from how to prevent the spread of sexually transmitted diseases to how to avoid infections through good hand-washing techniques.

In the clinic, inmates are also offered opportunities to learn more about stopping smoking, losing weight and dealing with chronic pain.

8. Frequently Asked Questions

Why can't inmates take the same medications that they are used to taking?

Sometimes they can. Prescribers are expected to order medication off a list known as a formulary. The formulary used in Corrections is the Medicaid formulary. In some instances, a drug prescribed in the community may be on the formulary and in other instances it may not. If not, the doctor will prescribe an equivalent medication. Sometimes inmates go through a period of detoxification before medications are ordered.

What is a formulary? Why do you have one?

A formulary is a list of preferred drugs, selected by a committee of doctors, pharmacists and other health care professionals. The purpose of a formulary is twofold: it encourages prescribers to use medications that have been proven to be effective and it helps contain the cost of care by limiting the different brand names of the same kind of medication.

What if an inmate needs a medication that is not on the formulary?

If an inmate needs a medication that is not on the formulary, the prescriber sends a special request to the regional medical director, explaining the reason. The regional medical director considers the reasons and may ask the prescriber to consider other alternatives but usually approves the request.

What is a provider?

A provider is a term used to describe doctors, nurse practitioners and physician assistants.

How long will it take to get medications after seeing a provider?

Unless it is a drug that must be given immediately, medication is usually supplied in a day or two after getting a prescription.

Can inmates get nicotine patches to help quit smoking?

For security reasons the DOC does not provide nicotine patches. While the enforced ban on smoking in the facilities may be uncomfortable, most inmates usually do fairly well with time.

Can an inmate get supplemental vitamins and/or naturopathic remedies?

These can be ordered from the commissary. Herbal supplements and natural products are not on the formulary and are not made available unless the provider decides to write an order for them.

How does an inmate get to see a dentist or have their eyes checked?

An inmate puts in a sick call slip to see the dentist or optometrists, both of whom visit the facilities on a regular basis. Glasses are available for inmates who need them.

What can an inmate do if s/he is unhappy with his/her care?

Any inmate may file an informal complaint to resolve a problem or address his/her concern. The complaint will be addressed within 48 hours. If the complaint has not been resolved, then a grievance may be filed. If the grievance is dismissed, the inmate will receive a letter of explanation and may rewrite and resubmit the grievance again.

When there is a threat of death or injury, an inmate should alert the corrections staff that s/he has an emergency and the emergency grievance process will be started.

Can an inmate get an extra mattress or a low bunk?

A pass for an extra mattress will only be issued for women in the third trimester of pregnancy. A pass for a low bunk will only be issued to inmates:

- With a seizure disorder
- Who weigh over 300 pounds
- Who are elderly
- Who have had surgery within 30 days
- Who have an artificial limb
- Who have an acute fracture

What is a medical furlough?

When treatment and medical services for an inmate require services away from the facility, inmates are escorted by a correctional officer under close supervision. In some cases treatment requires more than one visit, housing at a residential treatment program, or long term care for a terminal illness. In all cases, family notification will be made by the superintendent. There are three types of furlough:

- **Long Term Medical Furlough** is for an inmate who is suffering from a condition that requires a hospital or hospice care that cannot be provided in the facility.
- **Treatment Furlough** is the transfer of an inmate to a residential treatment facility with services that are not available in the correctional facility. These services may include treatment for substance abuse, personal violence or other conditions of harmful behavior.

- ***Short Term Medical Furlough*** is the transfer of an inmate for in-patient medical or emergency services that are short term and cannot be done in the facility.

If you have questions about your loved one's health there are several steps to take:

How can a spouse find out about medical treatment while their partner is incarcerated?

The best person to ask is the inmate. If the inmate wishes, s/he can also sign a release of information allowing the caseworker and family to have access to medical information.

If an inmate is sent to another facility, how soon will it be before they are seen by medical staff?

Inmates are screened by a nurse upon admission and the sick call process will be explained in detail.

Can family go with an inmate to see a doctor on the outside?

Due to security reasons, family members may not accompany an inmate to any doctor visits.

If an inmate cannot sleep can they get some sleeping medication?

Most facilities have a policy of waiting a couple of weeks to allow the inmate to adjust to the new surroundings. After this waiting period, an inmate will undergo an assessment to see what is causing the sleep problem and the appropriate treatment is started. This sometimes includes medication but this is usually not the long term solution.

What if an inmate refuses to take their medication?

An inmate can refuse any medical treatment. If an inmate repeatedly refuses a medication, s/he is asked to talk with the nurse and doctor about the possible negative impact on health.

If an inmate is transported to the hospital for an emergency, who pays for the ambulance charges?

Inmates are not responsible for any ambulance charges incurred while they are incarcerated. This cost, like all health care costs in Corrections, is paid for out of the Vermont General Fund.

Why do inmates seem to move around so often?

Inmates usually transfer to other facilities within Vermont for one of four reasons: space; the need for special housing such as the infirmary; to complete some kind of program, related to reducing their risk of re-offending; or for security reasons.

Why are inmates sent out of state and why aren't families told in advance?

The most common reason an inmate is transferred out of state is the lack of space and bed availability. Inmates may also be transferred out of state when security or protective

custody is necessary or if an inmate makes a request to be transferred. Families are not notified in advance strictly for security reasons.

Does the facility-based health care provider continue to write orders for medication and care after an inmate is released?

No. Upon release into the community, all inmates receive a *discharge health summary*. This summary includes all the current information about their medications and treatments. Inmates are instructed to take their discharge health summary to their new doctor.

9. Additional Resources

Health Services Division

Department of Corrections
103 South Main Street
Waterbury, VT 05671-1001
(802) 241-2295 Voice

Department of Corrections

103 South Main Street
Waterbury, VT 05671-1001
(802) 241-2263 Voice
www.VDOC.state.vt.us

Victim Services

Department of Corrections
103 South Main Street
Waterbury, VT 05671-1001
(802) 241-2338 Voice

Agency of Human Services

Investigations Unit Hotline
1-877-360-2597 Voice

Vermont Prisoner's Rights Office

6 Baldwin Street
Montpelier, VT 05633-3301
(802) 828-3194 Voice
(802) 828-3163 Fax

Human Rights Commission

135 State Street, Drawer 33
Montpelier, Vermont 05633-6301
1-800-416-2010 Voice/TTY
(802) 828-2480 Voice/TTY
(802) 828-2481 Fax
human.rights@state.vt.us Email
www.hrc.state.vt.us Website

National Alliance for the Mentally Ill (NAMI)

Vermont Chapter
132 South Main Street
Waterbury, VT 05676
1-800-639-6480 Voice
(802) 244-1405 Fax
namivt@verizon.net Email
www.namivt.org Website

Vermont Protection & Advocacy

141 Main Street, Suite 7
Montpelier, VT 05602
1-800-834-7890 Voice
info@vtpa.org Email
www.vtpa.org Website

“If You Have a Parent in Jail Then This Book is For You”

An easy to read guidebook written and illustrated for children of all ages who may have a parent in jail.

To obtain free copies of this book please do so by calling the Community High School of Vermont at (802) 241-2273 or by writing to:

Community High School of Vermont
Department of Corrections
103 South Main Street
Waterbury, VT 05671-1001

Survey

We want to know what you think! The Health Services Division is committed to providing support to the friends and families of Vermont inmates. By letting us know what you think, we can continue to develop this manual to better help you through the incarceration experience. Please take a few minutes to fill out this survey, tear off and hand in at the front desk.

I am a:

Family member

Friend

This manual:

Was very helpful Was somewhat helpful Was not helpful

Answered my questions Answered some questions*

Did not answer any questions* Relieved my anxiety

Did not relieve my anxiety* Caused me anxiety**

*My question(s) is (are):

**This manual would have been more helpful if:

Prepared by Eve Haslam & Nikki Parker-Van Iderstine of the Health Services Division 2007

To request additional copies of this handbook please do so by calling the
Health Services Division of the Department of Corrections
at (802) 241-2295 or by writing to:

Health Services Division
Department of Corrections
Agency of Human Services
103 South Main Street
Waterbury, VT 05671-1001

This handbook is also available to view online at www.doc.state.vt.us